

Exhibit 1



Notice and Acknowledgement of Pay Rate and Payday/薪資及發薪日通知
Under Section 195.1 of the New York State Labor Law/紐約州勞工法第 195.1 條款

1. Employer Information/雇主資料

Name/名字: Weihong Hu

"Doing Business As (DBA)" name(s)/

招牌名: Mayflower Wenyu LLC

FEIN (optional)/聯邦報稅號 (可選擇的):

Physical Address/公司所在地址: 61-27

186TH Street, Fresh Meadows, NY 11365

Mailing Address/郵政地址: 61-27 186TH
Street, Fresh Meadows, NY 11365

Phone/電話: (718) 619-8818

Notice for Hourly Rate Employees/時薪員工的通知

3. Employee's Pay Rate/員工的薪資標準

\$ 12 per hour/每小時

4. Allowances taken/所取津貼:

- ☒ None/無
☐ Tips/小費 _____ per hour/每小時
☐ Meals/餐飲 _____ per meal/每餐
☐ Lodging/住宿 _____
☐ Other/其他 _____

5. Regular payday/正常發薪日:

Friday

6. Pay is/發薪頻率:

- ☒ Weekly/每週
☐ Bi-weekly/每二週
☐ Other/其他 _____

7. Overtime Pay Rate/加班費標準

\$ 18 per hour/每小時 (This must be at least

☒ times the worker's regular rate with few exceptions.) /此加班費必須最少是員工正常時薪的 1.5 倍(極少例外).

8. Employee Acknowledgement/員工認知:

On this day, I received notice of my pay rate, overtime rate if eligible, allowances, and designated payday in English and my primary language. I told my employer that my primary language is **Chinese**. /此日我收到薪資, 加班費, 發薪日, 以及津貼的中英通知. 我已告訴雇主我的母語是中文.

Li Yoh XING
 Print Employee Name/請正楷書寫員工姓名

Xing
 Employee Signature/員工簽名

4/7/17
 Date/日期

CHZF
 Preparer Name and Title/填表人名字及頭銜

The employee must receive a signed copy of this form. The employer must keep the original for 6 years. 員工必須收到此簽名表格的複印本, 雇主並須保存此表格正本6年.

2. Notice given/給予員工的通知:

- ☐ At hiring/雇用時
☐ On or before February 1/二月一號或之前
☐ Before a change in pay rate(s), allowances claimed or payday /在薪資, 發薪日, 或津貼變更之前